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# County of San Diego

## HEALTH AND HUMAN SERVICES AGENCY

### PUBLIC HEALTH SERVICES CHILDREN, YOUTH AND FAMILIES

P.O. Box 85222, Mail Stop P511F, San Diego, California 92186-5222  
(619) 692-8808 FAX (619) 692-8827

Children, Youth & Family Health Services  
Disease Control/Epidemiology  
Disease Prevention/Health Promotion  
Emergency Medical Services  
HIV/AIDS Services  
Medical Quality Assurance  
Public Health Laboratory  
PH Nursing/Border Health  
TB & STD Control  
Vital Records

#### ***Dear Parent:***

***Please bring this letter to your health care provider at the time your child has their school entry physical. It will give them important information about the risk of tuberculosis (TB) for children in San Diego County. If you have questions about the Child Health and Disability Prevention (CHDP) Program or the check-up required for school entry, please call (619) 692-8808.***

#### ***Estimados Padres de Familia:***

***Hagan favor de llevar esta carta a su médico cuando lleven a su niño(a) al examen físico requerido para entrar a la escuela. Esta carta proporcionará al médico, información importante sobre el peligro de tuberculosis (TB) en los niños que residen en el Condado de San Diego. Si tiene preguntas acerca del Programa de Salud Infantil y Prevención de Incapacidades (\*CHDP en inglés) ó el examen físico requerido para ingresar a la escuela, por favor llame al (619) 692-8808.***

Dear Health Care Provider:

This letter is to bring to your attention current recommendations for TB skin testing of school age children. The American Academy of Pediatrics recommends that children be assessed for TB risk factors and screened if risk is identified.

For children in high risk categories, screening is encouraged at the time of initial visit.

1. Contacts of adults with infectious TB.
2. Those who visit, were born in, or have visitors from regions of the world with high TB prevalence.
3. HIV-positive or those with other immunosuppressive conditions, including chronic renal failure, diabetes mellitus, malnutrition, and lymphoma.
4. Incarcerated adolescents or history of incarceration.
5. Children frequently exposed to the following adults: HIV-infected, homeless, users of street drugs, incarcerated persons, nursing home residents, and migrant workers.
6. Children with a history of intake of unpasteurized milk products/cheese from Mexico.

For children who have no risk factors but who reside in high prevalence regions or those whose history is incomplete, periodic Mantoux tests (such as at ages 5 and 14) should be considered.

San Diego can be considered a moderately high prevalence area with an overall rate of 11 cases of active TB per 100,000 population (national rate is 5 cases per 100,000). However, rates vary among ethnic groups and should be considered when evaluating any particular child. For San Diego in 2002, Asians had a case rate of 33 per 100,000. Hispanics and Blacks, followed at 20/100,000 and 15/100,000 respectively, while non-Hispanic Whites had a low rate of 3/100,000.

The American Academy of Pediatrics, the Centers for Disease Control and the County of San Diego Health and Human Services Agency strongly recommend the ***exclusive use of the Mantoux skin test*** when screening children for TB due to its higher degree of accuracy than multiple puncture tests. The Mantoux test should be read by trained

health care personnel, **not** a parent or guardian.

***Guidelines for interpretation of Mantoux Skin Test Reaction in California:***

1. A reaction of 5 millimeters or more is considered positive if the child meets any of the following criteria:
  - a. is immunosuppressed (HIV infection or other conditions);
  - b. has had a close and recent contact to an infectious TB case;
  - c. has a chest x-ray consistent with TB (this applies when evaluating a child for whom TB is in the differential diagnosis.)
2. A reaction of 10 millimeters or more is considered positive for all others (including those who have had BCG).

***Recommendations for follow-up of children with a positive Mantoux Skin Test:***

Children who are found to have a positive Mantoux tuberculin skin test should receive:

- a. a chest x-ray; and
- b. a medical evaluation to rule out active disease; and
- c. placement on therapy for latent TB infection (unless contraindicated).

For children, isoniazid (INH) is used in a single daily dose of 10mg/kg body weight, not to exceed 300 mg per day. The Centers for Disease Control and Prevention and the American Academy of Pediatrics recommend 9 months of therapy.

Recording/reporting test results:

The results of a Mantoux skin test should be recorded in millimeters of induration on the Report of Health Checkup for School Entry form. Results should also be recorded on the back of the California Immunization Record card.

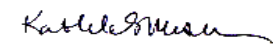
In children **3 years of age or younger**, the results of a **positive** TB skin test and chest X-ray results should be reported to the County's TB Control Program by calling (619) 692-8604 or by filing a Confidential Morbidity Report form (to obtain form, call (619) 515-6620). Do not report children over age three, unless active disease is suspected.

To report a **suspected or confirmed active case of TB disease**, call the TB Control Program at (619) 692-8610.

If you have any questions regarding the testing, treatment, or follow-up of children with TB infection or disease, please call the TB Control program at (619) 692-8627.

Thank you for your attention to this matter.

Sincerely,



Kathleen S. Moser, M.D., M.P.H.  
Chief, TB Control Services

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